

# DOCUMENT RESUME

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## ABSTRACT

The report by the President's Committee on Mental Retardation mentions the accomplishments of the last decade, including the beginning of national networks for diagnosis, a plan for services in each state, and advances in public awareness of all facets of mental retardation. The following programs are considered necessary: services must be brought to those in the most need (especially low income groups); recruitment and training programs for supportive workers must be developed; more imaginative use of resources is needed at all levels; more public-private partnerships in planning, services, and research are needed; basic research and its quick translation into services needs encouragement; and the needs of the retarded should be considered in future social and residential planning. Charts and graphs illustrating findings are included throughout. (JM)

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# MR 69:

A third report by the President's Committee on Mental Retardation  
about developments in the national campaign to overcome mental retardation



## Accomplishments Of The President's Committee On Mental Retardation, 1966-69

- Focused national attention on soaring rates of mental retardation in deprived urban and rural areas.
- Co-sponsored through the Advertising Council a nationwide campaign to promote public awareness of mental retardation.
- Distributed over 4 million educational booklets on mental retardation through citizen groups and to individuals.
- Published a mass distribution booklet on volunteer and career opportunities in the mental retardation field for youth and college students.
- Drew attention to the all but undressed problems of the retarded in rural areas, the retarded with multiple handicaps, the retarded who are emotionally disturbed, retarded teenagers, the adult retarded.
- Held a series of public forums at which public and private agency authorities as well as parents, teachers, neighborhood workers and other grassroots individuals from multi-state areas reported on mental retardation program needs, progress, problems and plans.
- Conducted surveys of citizens, key public and private agency leaders, and civic organization leadership in communities to determine adequacy of present mental retardation programs as well as potential interest in and support for mental retardation services.
- Helped spur action by federal, state and private agencies on reform and development of new patterns in residential services for the retarded.
- Recommended the national mental retardation information and resource center that is now nearing development.

## Current Major Projects Sponsored By The President's Committee On Mental Retardation

- On economics:  
A study of the costs and economic impact of mental retardation
- On education:  
A study of learning problems, special education and teaching practices
- On habilitation:  
A study of needs in vocational education and employment of the retarded
- On poverty and mental retardation:  
Relationships between deprivation and retardation: a detailed study
- A survey of research on relationships between malnutrition and mental retardation
- A study of lead poisoning as a cause of mental retardation
- On manpower:  
A study of mental retardation program manpower needs
- 1969 work conferences:  
On residential services for the retarded  
On manpower resources development for mental retardation  
On inner city education problems

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MR 69:

**TOWARD PROGRESS: The Story of a Decade**

A third report by the President's Committee on Mental Retardation  
about developments in the national campaign to overcome mental retardation





What has to be done, has to be done by government and people together or it will not be done at all. . . . To match the magnitude of our tasks, we need the energies of our people—enlisted not only in grand enterprises, but more importantly in those small, splendid efforts that make headlines in the neighborhood newspaper. . . . With these, we can build a great cathedral of the spirit—each of us raising it one stone at a time, as he reaches out to his neighbor, helping, caring, doing.

—President Richard M. Nixon





**pcmr**

Dear Mr. President:

I have the honor to transmit the 1969 report of the President's Committee on Mental Retardation.

This report assesses the nation's present mental retardation programs and recommends directions that federal, state, and local agencies, both public and private, should take in building and improving those programs during the 1970's decade.

Charting of much of the need in this long-neglected area remains incomplete, however. The Committee therefore has in progress an extensive group of activities aimed for the formulation of action recommendations.

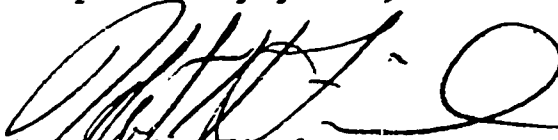
Among those on which reports will be ready for your consideration during the coming months are a survey of research into malnutrition-mental retardation links, a study of mental retardation incidence in poverty areas, and an exploration of needs in vocational education and employment for the retarded.

Committee work conferences this summer and fall will discuss education needs of inner city children, manpower resources for mental retardation programs, and residential services for the retarded.

Also in progress are a study of the costs and economic impact of mental retardation and studies of special, often overlooked groups of the retarded -- the retarded living in rural areas, those with multiple handicaps, the teenaged and adult retarded.

The Committee is deeply grateful for your interest in its work and asks your continuing guidance and encouragement.

Respectfully yours,

  
Robert H. Finch  
Chairman

The President  
The White House  
Washington, D. C.

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# MR 69:

**T**ime to sum up a decade that has included first discovery by the nation as a whole of the existence and needs of the mentally retarded.

Time, also, to consider carefully and begin building the urgently needed programs for the retarded that must come into being during the 1970's.

Time to renew our national resolve to bring the mentally retarded into a full participation in daily life and work as their individual capabilities permit.

Time to press on in the quest for ways of preventing mental retardation.

During the turbulent 1960's now ending, the United States as a whole took its first large steps in confronting and coping with the long-neglected nationwide problem of mental retardation. People from all walks of life and every view of national need and action have joined in this effort. Four Presidents have taken a personal interest in the problem and lent the power and prestige of their office to involve

government at all levels as well as citizens and their voluntary associations in creative action to overcome retardation.

As a direct result of this national interest and effort, states and communities have been moving throughout the decade toward improved services and opportunities for the retarded, while federal participation in the effort has risen many-fold.

Among the decade's accomplishments have been:

- The beginnings of a national network of mental retardation diagnosis and evaluation centers; launching of a network of mental retardation research, teaching and professional training centers; development of facilities and staff improvement programs.
- Development by every state of a plan for mental retardation services. Many have taken action steps such as mandatory testing of infants for phenylketonuria, mandatory public school programs for **all** children of school-

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attendance age, vaccination of children and adults against measles.

- Increased acceptance of the retarded as trainees in vocational rehabilitation programs and a rapid growth, as a result, of employment opportunities for trained retarded workers.
- Improved relationships between the biomedical and education fields in human development programs; development of a national network of education resource and instructional materials centers for education of the handicapped.
- Major advances in public awareness of the retarded and their needs, spurred by an Advertising Council-conducted national public service advertising campaign that continued for 3½ years.
- Dramatic growth in numbers of volunteers serving the retarded; founding of the first national organization of youth serving the retarded.





- Significant growth in community mental retardation programs and in the concepts of family- and community-based activities for the retarded.
- Development and acceptance of medical procedures through which some mental retardation having biomedical causes can be predicted, diagnosed and prevented.
- Focusing of attention on the extraordinarily high incidence of retardation in poverty areas.

Dramatic and historic though these accomplishments are, however, **they are beginnings only**. They have enabled us to chart the size of the national problem of mental retardation and to favorably dispose many Americans toward action to overcome the problem. But tremendous needs and problems remain. Among them:

- The staggering problems of human underdevelopment and underperformance in the nation's poverty areas continue all but untouched.
- Most mental retardation is discovered three, four and five years too late. Retarded mental development establishes itself in earliest childhood and can be most effectively countered then. But most mild retardation (which accounts for three-fourths of the mental retardation in the nation) is identified only during the school years, if then.
- Some 5 million of the nation's estimated 6 million mentally retarded are never reached by any kind of service developed specifically to meet the needs of the retarded.
- Many of the 200,000 institutionalized mentally retarded persons continue warehoused in dehumanizing residential programs that make no serious attempt to rehabilitate residents.
- In many communities, services for the retarded are inadequate or almost nonexistent because agencies will not act, are unable to



cooperate, or are prevented from acting by policies, procedures and lack of funds that restrict their development of services.

- The American people have yet to fully accept mental retardation as a mainstream challenge that can and must be met through the application of every public and private resource that citizen concern and action can bring to bear.

These are tough problems that are deeply rooted in traditional attitudes and patterns of thinking, in unexamined traditional ways of doing things, in the piecemeal ways that we Americans take our enthusiasms and our let's-do-something-about-it resolves. They are problems that will not be overcome easily or soon. The nation's initial great thrust against mental retardation during this decade, despite important accomplishments, has scarcely touched them.

We need to rededicate ourselves to the struggle with these problems if we are to make real headway in building effective services for the retarded and preventing retardation. This rededication must take place at every level of American life — in our local governing bodies as well as in our voluntary community associations, among state legislators and officials as well as in state federations of civic and service clubs, in our national leadership both public and private, among citizens of all ages, and especially among the nation's young people, soon to constitute half of the U.S. population.

As a result of assessing the nation's situation and outlook in mental retardation, this committee has identified a group of areas in which concerted public-private measures at all levels can bring significant progress in overcoming mental retardation. These areas are:

- Increasing the availability of mental retardation services, particularly in the urban

and rural low income, disadvantaged neighborhoods in which some three-fourths of the nation's mental retardation is found. (Page 9)

- Development of more and better manpower recruitment and training programs for work with the retarded. (Page 12)

- Better, more imaginative use of existing resources at all levels, as well as broader realization and use of the resource that the retarded themselves represent. (Page 16)

- Development of more public-private partnerships in mental retardation programs, services and research. (Page 21)

- Continued encouragement for basic research in mental retardation and for rapid translation of research results into service program uses. (Page 25)

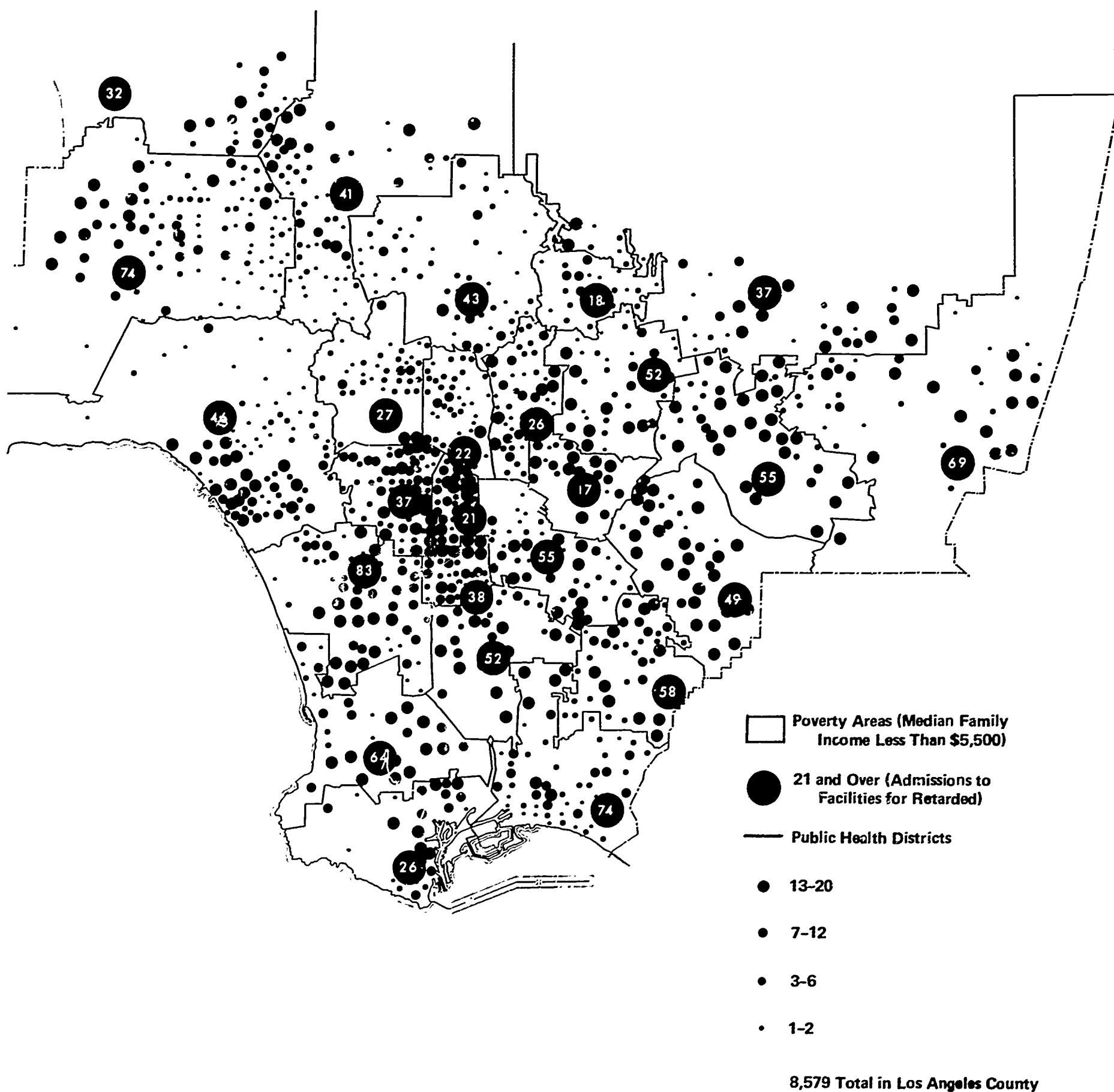
- Taking into account the special education, training, guidance and other needs of the mentally retarded in social and institutional planning for the future. (Page 26)

These are the areas which this report will cover.

The Committee has already made recommendations in some of these areas and reaffirms those recommendations now (see MR 67 and MR 68, the Committee's first and second reports to the President, and Page 31 of this report). Detailed reports with recommendations in other areas are in development, some scheduled for completion and release in the last half of 1969 and early 1970.

The content of this report is a general evaluation of where the national mental retardation effort stands at the end of the 1960's decade. Some aspects of that situation that stand in particularly urgent need of attention are discussed in detail, with specific actions recommended.

# TRACT DISTRIBUTION OF IDENTIFIED PROFOUND AND SEVERELY MENTALLY RETARDED PERSONS IN LOS ANGELES COUNTY



8,579 Total in Los Angeles County

Source: A Study in Planning, the Los Angeles County Mental Retardation Services Board, October 1968, Page 4.

**Mental Retardation Services  
Must Reach All People Who Need Them.  
Particularly, Ways Must Be Found  
To Bring These Services To People Needing  
Them In The Nation's Low Income,  
Disadvantaged Neighborhoods.**

No recent finding about mental retardation has had greater impact than the discovery that retardation rates soar in urban and rural low income areas. No estimate of mental retardation incidence in such neighborhoods is less than twice the national average. One inner city count of retarded persons found one-third of the total population in a several-block area functioning at retarded achievement levels!

The facts operating to create such disproportionately high levels of retardation in poverty areas are not all known with certainty. Little doubt remains, however, that prominent among them are mother and child malnutrition, chronic disease-producing surroundings, and the harsh conditions in which countless children of poverty are reared. In such conditions, children are often deprived of the stimuli of touch, talk, shared activity and encouragement that help produce growth and learning.

The response to this disastrous situation has so far been slow, uneven and groping. There are some Head Start programs for retarded children, and a few local associations for retarded children have now joined in cooperative inner city programs for the handicapped while others are working closely with Model Cities planners.

Representatives from low income or minority neighborhoods are beginning to be welcomed on retarded children association boards and public agency advisory panels at community and state levels.

Day care for small children is outgrowing its babysitting origins and moving toward educational, recreational and social growth activities that help foster physical and mental development.

Comprehensive health care services that begin as early as possible in pregnancy and follow mother and child through the critical early childhood years are now available (although not necessarily extensively used) in a few inner city areas.

Some school systems are reexamining both regular and special instruction, seeking ways to teach that are relevant in the lives of those being taught and help each child succeed in learning to the fullest of his individual abilities.

A major action response to the need is the National Association for Retarded Children-National Urban League-Family Service Association of America joint demonstration project ("Project FINE") of developing effective ways of serving the inner city retarded; this project is just getting under way in five cities.

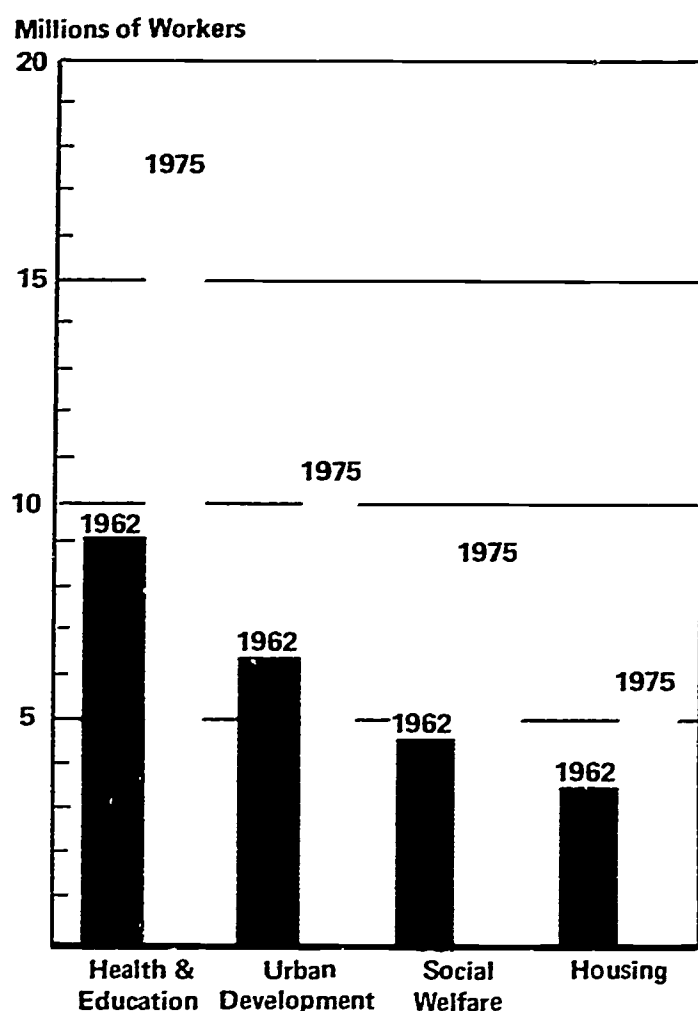
There should be scores of such cooperative efforts joining national voluntary, civic and service organizations in action programs to help overcome child and adult-crippling handicaps in city and rural poverty areas. We call on every citizen to find out what his community service organizations are doing to help in this urgent need, to join in any effort being made, to take leadership if no effort is under way.

Most experts now agree that comprehensive health, educational and physical development programs begun in earliest childhood offer the best hope of preventing the great bulk of the physical, mental and emotional handicaps that impose such enormous cost in wasted or hobbled lives today.

We also call on state and local government leaders and planners, community developers,



# **INCREASED NEED FOR MAN-POWER IN FOUR NATIONAL AREAS HAVING IMPLICATIONS IN MENTAL RETARDATION PROGRAMS**



Projection to 1975 assumes national goals for continued improvement in American life, then depicts manpower needed to support those goals. Year 1962 is for comparison.

Source: Adapted from Manpower Report of The President, 1968; Page 306.

architects, industrialists, builders and all others who create the community environment to build cities and towns that help foster healthy human development.

The most dramatic new public initiative holding out promise in the attack on handicapping conditions is the federal government's Office of Child Development, created in April by President Richard Nixon as part of his call for a national commitment to provide all American children an opportunity for healthful and stimulating development during the first five years of life. The Office of Child Development promises to stimulate comprehensive programs for child development, combining programs that deal with the physical, social and intellectual. In carrying out its purposes, an expansion of the Parent and Child Center program has been announced.

This Committee supports and endorses the Office of Child Development's purposes and program.

**We call on public agencies and voluntary organizations at all levels in American life to give creative assistance to the Office of Child Development in realizing its purposes and programs.**

As President Nixon said in announcing the Office, "Our commitment to the first five years of life will not show its full results during my administration, nor in that of my successor. But if we plant the seeds and if we respond to the knowledge we have, then a stronger and greater America will surely one day come of it."

In addition, we urge once again that the public agencies and private organizations seeking to build enduringly effective programs to overcome human handicaps in poverty areas commit themselves to:

1. Maintain their priority attention to the programs for at least a generation in order to attain the goal of significantly reducing incidence of handicaps in children.



**2. Involve representatives from neighborhoods or communities served in their work and planning.**

Such involvement is more than desirable; it is essential. In the final analysis, the community accomplishes only what its citizens decide must be accomplished.

Nor is it enough for the national offices of locally serving organizations, both public and private, merely to give their local units a policy permission and a blessing to move to meet local needs. Many local units, with every good will and intention, do not know how to go about organizing for effective action in neighborhoods with which they have no previous contact, do not know how to cultivate and apply resources of all kinds, do not know how to assess needs and build constructive, innovative responses to those needs.

**National organizations must help their local units do these things through targeted application of practical consultation, assignment of specific staff and investment of new-program seed money.**

**MR 69:**

There are neglected special groups of the mentally retarded whose needs and potentials call for new study and action.

Mentally retarded teenagers often slip into limbo on completion of school programs designed for them. Few communities have either social interest or vocational preparation programs to capture and hold these young people.

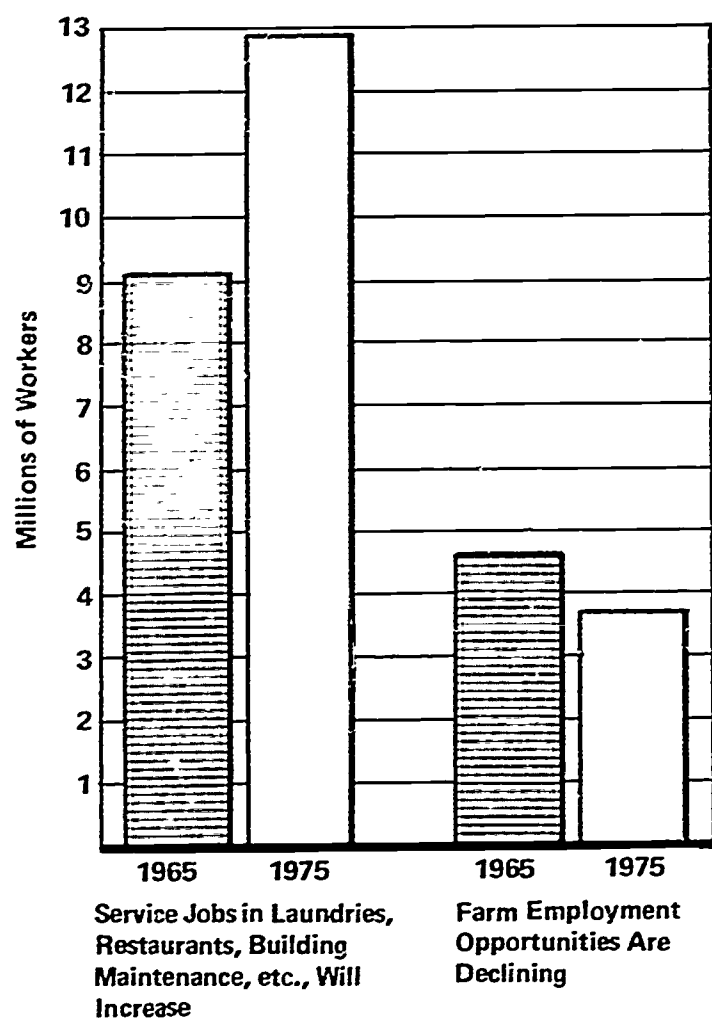
**We recommend that city and county governments, in cooperation with voluntary groups interested in the retarded, move to remedy such neglect.**

In every community and in every public institution for the retarded, there are retarded adults capable of living and working independently. In addition, retarded persons being trained for independent community living need a base from which to launch into the community.

These purposes and possibilities can be admirably served together through group homes—private residences in which a small number of adult retarded persons live with an individual or couple employed as “house parents.” Such residences are already in successful operation in several states.

**We urge their development in every state as combined residences and sources of counseling and guidance in daily living problems for the adult retarded living in the community.**

**CHANGING PATTERNS OF OCCUPATIONS WILL ALLOW MORE MENTALLY RETARDED TO BE EMPLOYED IN SERVICE JOBS**



Source: Adapted from Manpower Report of the President, U.S. Department of Labor, March 1969.

## Improved Manpower

### Recruitment And Training Programs For Work With The Mentally Retarded Must Be Developed.

The gap between needed and available services in mental retardation programs grows wider daily. A major cause of this situation is lack of hands to provide the services. Why this lack? Programs are often so inadequately funded that they cannot attract and keep either professional or support staff. And even available workers are poorly deployed in many cases.

Shortages of professional skills, serious though they are, are not as great as those of supportive workers—attendants, aides and other specialists' assistants. Here the shortages can have disastrous effects. Supportive workers are more often and regularly in contact with the retarded than any other workers in residential programs and make a crucial contribution in community programs.

The kind of day-to-day life a retarded person lives often depends directly on the number and quality of supportive workers. The great shortage of supportive workers in mental retardation programs, this Committee believes, is the key problem in the retardation program manpower field. It must be solved.

The public and private agencies that employ supportive workers in their programs for the retarded should undertake a general upgrading of those personnel and their positions by whatever practicable means they can devise.

We recognize that such an upgrading cannot be carried out overnight. Nor can it be carried out in a vacuum in which the managers of programs for the retarded are left to work out new procedures as best they can.

In mental retardation programs operated by the states, the state itself—its legislators and officials—must move to change laws and regulations that have fastened archaic personnel

practices on public programs for the handicapped and needy.

Citizens themselves should demand and be prepared to support upgradings in status and salaries for supportive workers in private agency programs for the handicapped.

Citizen groups, colleges and universities and professional organizations can make invaluable contributions to the success of this effort. The many civic and service organizations that have long prided themselves on support of scholarships for students training as professional specialists might now also consider establishing scholarships for the training of assistants to such specialists.

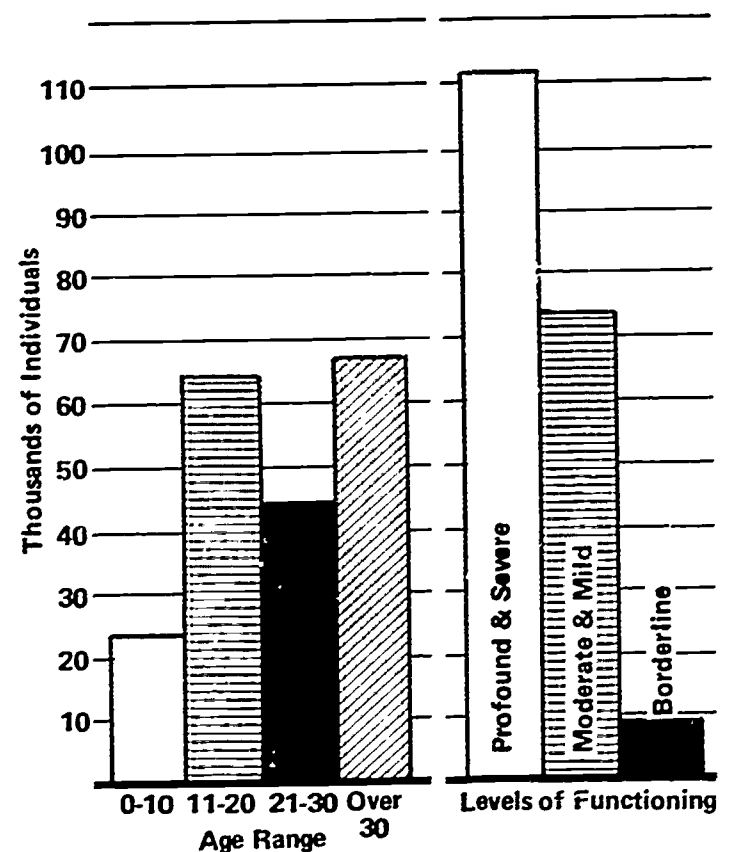
Colleges and universities should establish practical, work-related courses leading to professional certification for assistants in social and institutional service programs. Community colleges and 2-year colleges, especially, have an important contribution to make in this area through programs of training that are geared directly to community needs and on-job experience.

And professional organizations, in the interest of their own members' greater professional effectiveness, should analyze the application of work and skills in social service settings with a view to redefining the roles and functions of specialists and their trained assistants. Aim of this analysis: to obtain maximum spread of available people and skills to meet needs.

These measures will bring a new deployment of staff resources in which all participants will be personally and professionally effective, competent and recognized. Such a revamped system, we believe, will reduce the proportion of public and private monies needed for mental retardation program personnel resources.

The major responsibility for making this reform belongs to the states and to the private, voluntary organizations that serve the retarded in the community. But the federal government, too, should take a leading part.

### SPECIAL GROUPS OF RETARDED NEED SERVICE



A survey of 168 residential care facilities indicates that the resident population of 201,000 includes high percentages of adolescents and persons over 30 who are profoundly and severely retarded. Services need to be planned for this population.

Source: Adapted from American Association on Mental Deficiency, Division of Special Studies, Institutional Evaluation Project, 1969.



Cooperatively, through the Departments of Labor and Health, Education, and Welfare, the federal government should furnish a counseling service through which field teams of expert community and institution service organizers help states and private organizations plan and carry out supportive staff upgrading and over-all improvements in staff deployment in programs for the retarded and other handicapped persons.

Better deployment of supportive staff in programs for the retarded will help reduce present shortages of professional specialists. But preparation of such specialists to meet tomorrow's mental retardation services needs must continue.

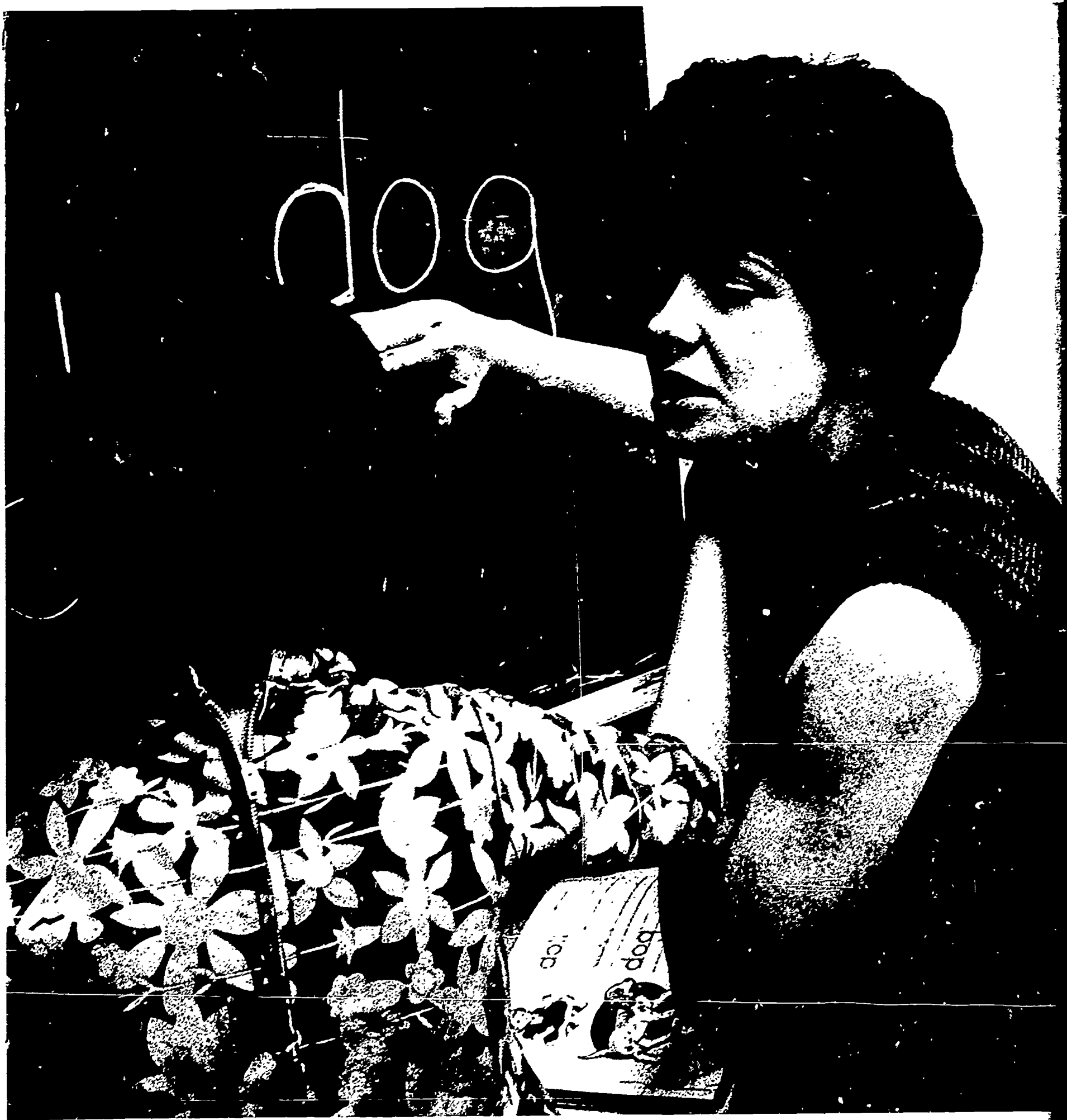
The existing federal grant, scholarship and work training programs for specialists in work with the handicapped should be continued and expanded, with greater tuition assistance being made available for college undergraduates.

In addition, we now need to make long-term, federally-supported utilization of experience from the immensely successful, low-cost programs through which disadvantaged youth, college students and senior citizens have been working as aides in programs for the retarded.

Among these have been the Student Work Experience and Training (SWEAT), Volunteers in Service to America (VISTA) and Foster Grandparent programs.

Finally, the widespread and fast-growing interest of youth and college students in volunteer service with the retarded should be put to meaningful work by every agency and group concerned with the retarded. Their interest is already being expressed in scores of voluntary organization activities with the handicapped. It is exemplified in the growth of the NARC-Youth membership to 97,000 in 2 years. From the ranks of these teenagers and young adults will come many of the coming decade's program leaders, staff, volunteers and community supporters.







**Fuller, More Imaginative  
Use Of Resources—Including  
The Resource Which The Retarded  
Themselves Represent—  
Is Needed At All Levels.**

The belief that large infusions of federal money alone can produce better programs and facilities is as mistaken in the mental retardation field as in any other. If there is to be long-term healthy growth and effectiveness in mental retardation programs and facilities, state and local governments—with citizen, corporate, foundation and private agency participation—must furnish the majority of their support.

No less mistaken, however, is the belief among some federal government planners that a federal fund cut-off or reduction will bring state or local government assumption of the costs of the affected program. Such action more often sounds the program's death knell.

We urge, therefore, that federal funding for mental retardation research, training and demonstration-improvement programs (including university-affiliated programs) continue, with evaluation of the effectiveness and results of these activities being made within the next year.

We also recommend that mental retardation facilities construction and staffing appropriations be maintained so that the intent of Congress in providing (in Public Law 88-164) for a national network of operating mental retardation research and training centers can be realized.

At the same time, we urge state, county and local government planners of mental retardation services and facilities to develop their long-term program operations on the foundation of their jurisdictions' tax bases.

**MENTALLY RETARDED ADULTS**

JOB TITLE	NUMBER
Animal Caretaker . . . . .	5
Bindery Worker . . . . .	5
Building Maintenance Wkr. . . . .	114
Buoy Maintenance Helper . . . . .	2
Card Punch Operator . . . . .	51
Carpenter . . . . .	1
Carpenter Helper . . . . .	5
Cartographic Aide . . . . .	3
Charman . . . . .	2
Clerk . . . . .	629
Clerk, File . . . . .	158
Clerk (Money Counter) . . . . .	3
Clerk (Numbering) . . . . .	2
Clerk-Receptionist . . . . .	1
Clerk-Typist . . . . .	89
Control Clerk . . . . .	6
Cook . . . . .	1
Currency Examiner . . . . .	1
Dishwasher . . . . .	5
Elevator Operator . . . . .	11
Engineering Aide . . . . .	6
Farm Laborer . . . . .	7
Food Service Worker . . . . .	219
Forest Worker . . . . .	14
Furniture Repairman Helper . . . . .	3
Garageman . . . . .	3
Groceryman . . . . .	2
Ground Maintenance Worker . . . . .	27
Housekeeping Aide . . . . .	109
Janitor . . . . .	341
Laboratory Worker . . . . .	28
Laborer . . . . .	1303
Laundry Marker . . . . .	4

## EMPLOYED BY THE FEDERAL GOVERNMENT

JOB TITLE	NUMBER
Laundry Worker . . . . .	273
Library Assistant . . . . .	7
Mail Clerk . . . . .	170
Mail Clk. (Motor Veh. Opr.) . . . . .	1
Mail and File Clerk . . . . .	27
Mail Handler . . . . .	186
Medical Technician . . . . .	8
Messenger . . . . .	296
Mess Attendant . . . . .	445
Nursery Worker . . . . .	3
Office Draftsman . . . . .	2
Office Machine Operator . . . . .	164
Paint Worker . . . . .	2
Photocopy Operator . . . . .	8
Photographic Processing Aide . . . . .	7
Physical Science Aide . . . . .	5
Porter . . . . .	18
Press Cleaner . . . . .	9
Presser (Flatwork) . . . . .	15
Printing Plant Worker . . . . .	22
Publications Supply Clerk . . . . .	17
Radio Repairer Helper . . . . .	1
Sales Store Worker . . . . .	16
Small Arms Repairer Helper . . . . .	6
Stock Clerk . . . . .	77
Substitute Mail Handler . . . . .	734
Supply Clerk . . . . .	23
Telephone Operator . . . . .	1
Vehicle Maintenance Wkr. . . . .	10
Ward Attendant . . . . .	13
Warehouseman . . . . .	26
Washman . . . . .	15
Washman Helper . . . . .	17
<b>TOTAL:</b>	<b>5784</b>

The U.S. Civil Service Commission has written agreements with 42 federal departments and agencies to employ the mentally retarded in accordance with federal personnel practices. In mid-1969, the government employed 5,784 mentally retarded persons in 66 job titles.

Source: Adapted from Reports by the U.S. Civil Service Commission and the President's Committee on Employment of the Handicapped, 1969.

The essence of stimulating healthy development and change (where needed) in programs for the retarded throughout the nation lies in persuading local and state authorities such as county commissioners and state legislators that they must give serious attention to how effectively, in terms of results in people's lives, are spent the huge sums—now three-quarters of a billion dollars a year—that they appropriate for mental retardation programs.

Unless mental retardation program leaders and interested citizens throughout the nation accept this challenge and bring retardation needs into priority focus in citizen thinking and governmental action in their own states and communities, the national effort to combat mental retardation and improve life and prospects for the retarded will be essentially rootless.

Perhaps the most overlooked resource of all in the mental retardation field is . . . the retarded themselves.

Some three-quarters of this nation's retarded people could become self-supporting if given the right kind of training early enough. Another 10 to 15 percent could become partially self-supporting.

Are we capturing this potential and putting it to work? Some of it, yes. Most of it, no. Hundreds of thousands of retarded persons who could be trained and educated to useful work and life in American society are being wasted. Why?

One reason is that the nation's public school systems have not, in the main, accepted responsibility to educate all children.

A few states now require education programs for all children of school attendance age. Most, however, effectively exclude many handicapped children by offering few or no programs for them, while tens of thousands of retarded children, too mildly affected to be assigned to traditional classes for the educable or trainable retarded,

stumble as best they can through regular classes. These drop out of school as soon as they can, often to fall into the marginal-subistence spawning grounds of chronic welfare, health and social problems.

Another reason (closely related to the preceding one) that many retarded people arrive at adulthood unprepared for job or daily living is that many educators look at what a retarded child isn't, not at what he is.

The resulting curricula, developed with the retarded child's deficiencies rather than his abilities in mind, merely simplify and water down the course of instruction given normal children. Such programs require achievement in the academic areas where the retarded child is weaker and give little or no encouragement to the pragmatic skill areas in which he can accomplish something.

Moreover—compounding the error to an incalculable degree—the school program for a retarded young person often takes no account of his age, offering the same content and approach when he is 16 as when he was 6.

**Most retarded young people need training that**

**develops skills and attitudes for daily work and living.**

For most, this should be a program that looks to the pupil's eventual independent living in the community. For some, it should point toward sheltered work and living arrangements.

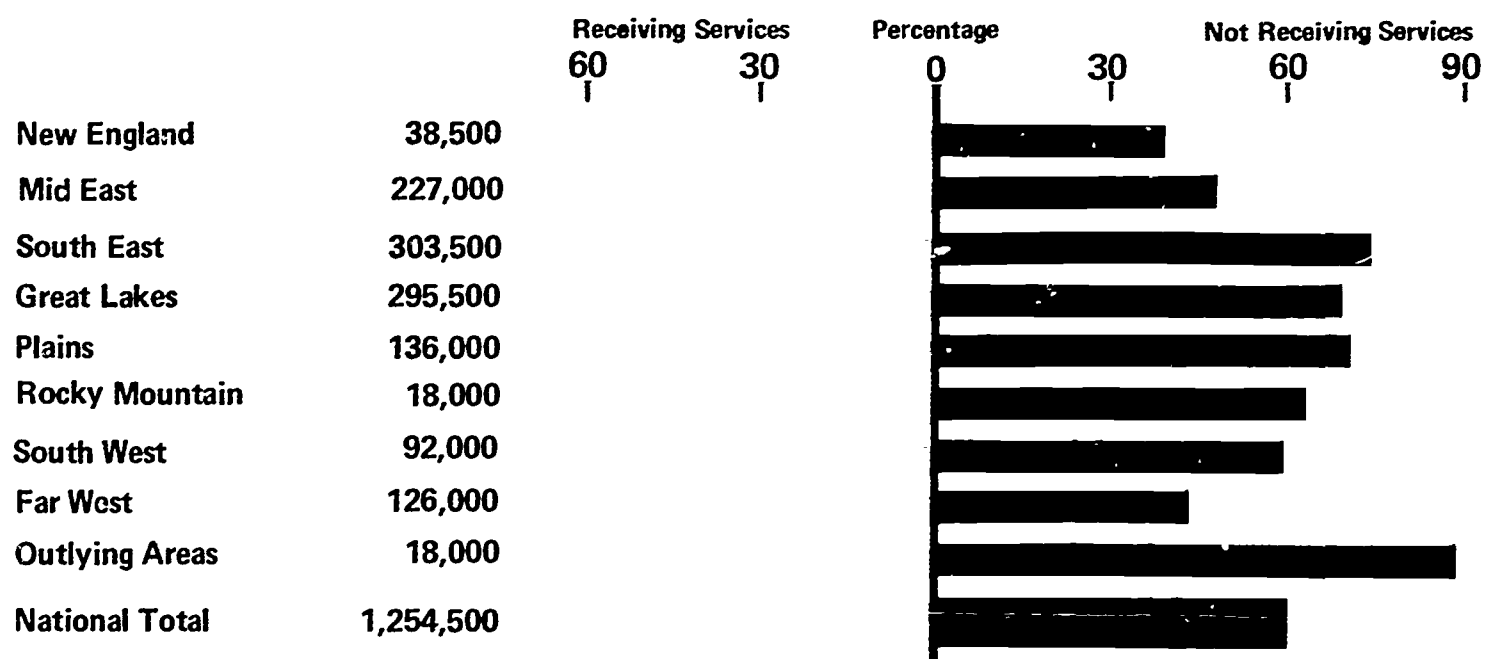
**It should in any case be a realistic curriculum that readies individuals to meet the actual demands of daily living and to work in jobs that actually exist in the community.**

**Business, industry and labor could play a much more significant role in this effort than they presently do.**

Among the needed measures requiring business and labor expertise are :

- Cooperative school-business programs to develop and assure training and work experience opportunities for mentally retarded students in special and vocational education classes.
- More direct, cooperative relationships between industry and vocational rehabilitation programs, so that there is a minimum of time loss between completion of training and job placement of handicapped workers. (Many

### EDUCATION SERVICES FOR MENTALLY RETARDED CHILDREN BY REGION



Source: Adapted from Report by Bureau of Education for the Handicapped, U.S. Office of Education, 1968.

trained retarded workers are lost to the work force during this period.)

- Special attention, in job training programs for the core city disadvantaged, to the mentally retarded job candidate. The National Alliance of Businessmen should be asked to develop programs and approaches that could make a significant contribution in this connection.

- Application of business and labor techniques and expertise to job redesign, job training and retraining, and the operation of special work facilities for the severely handicapped.

In particular reference to the last, occupational centers for the handicapped are often in desperate need of contract, materials and other support coordination. Industry, local government and private agencies should work together on these problems to develop coordinated procedures that assure maximum cost-effectiveness of center operations.

- Promotion of trained retarded workers' employability and job success should be intensified to reach the broadest possible spectrum of business and industry.

More industry-wide training and employment projects—of the kind that the National Association for Retarded Children, President's Committee on Employment of the Handicapped and the Department of Labor have been so ably promoting—should be stimulated and carried out. Industry should develop in-plant centers for handicapped workers and integrate the work of these centers into their regular production lines.

Finally, an on-going counseling service should be available to the retarded who are on their own in the community. (See also Page 11.)

Today's complex challenges of living and working pose puzzling enough dilemmas to people with normal intelligence and adaptive abilities. The retarded need special, expert guidance in coping with problems. The community should furnish that guidance.

## GENERAL CURRICULUM EMPHASIS

FOR EDUCABLE MENTALLY RETARDED								
APPROX LEVEL	YOUNG ELEMENTARY		INTERMEDIATE		JUNIOR HIGH		SENIOR HIGH	
APPROX AGE	AGE 3	AGE 10	AGE 11	AGE 13	AGE 14	AGE 15	AGE 16	AGE 18
INSTRUCTIONAL DAY	BASIC SCHOOL SUBJECTS				CONSUMER BUYING POLICIES			
	PRE-SCHOOL TRAINING READINESS		QUANTITATIVE		NEWS MEDIA	PRACTICAL LAW		DRIVER EO.
	COMMUNICATION COMPUTATIONAL		QUALITATIVE CONCEPTS		JOB DESCRIPTIONS	INSURANCE	COMMUNITY SERVICES	
	ORAL LANGUAGE DEVELOPMENT		PRACTICAL SCIENCE		BUDGETING	LEISURE TIME-P.E.	ADULT SOCIAL ROLES	
	SOCIAL COMPETENCIES				COMMUNITY ORIENTATION			
	GROUP MEMBERSHIP		FAMILY MEMBERSHIP		SOCIAL ROLES			
	DRESS MANNERS		PHYSICAL DEV.					
	SELF CARE							
	PRE-VOCATIONAL-VOCATIONAL-WORK-STUDY				VOCATIONAL INFORMATION			
	HEALTH PLAY							
	FOLLOWING DIRECTIONS				FIELD TRIPS TO INDUSTRY			
	COMPLETING TASKS							
	MANIPULATION							
					WORK STUDY			
					INTROO. TO PRACTICAL WORLD OF WORK			
					JOB TRAINING			
					LABOR LAWS			
					EMPLOYMENT PLACEMENT			

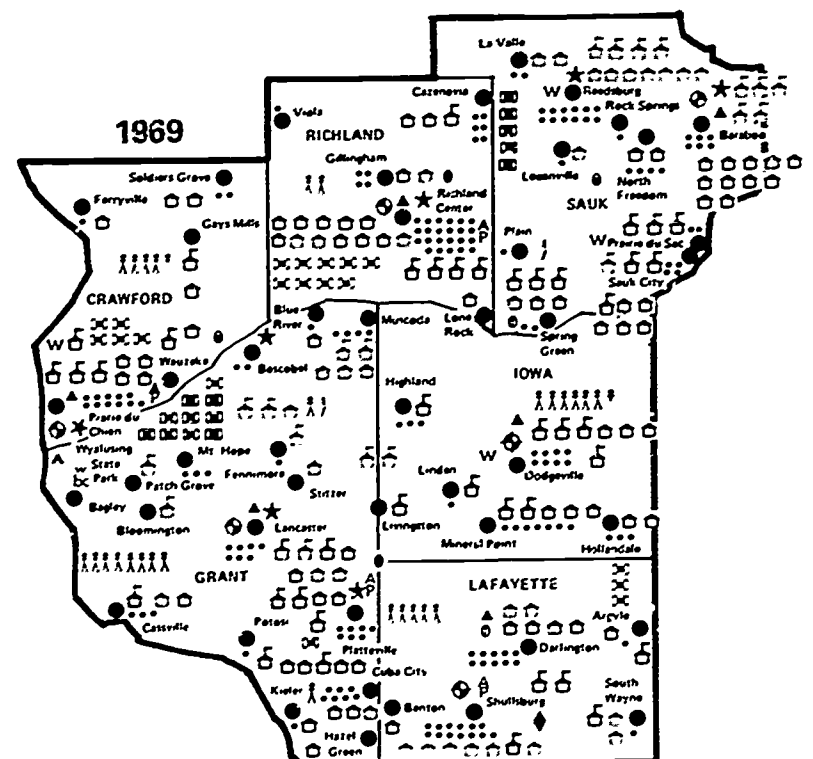
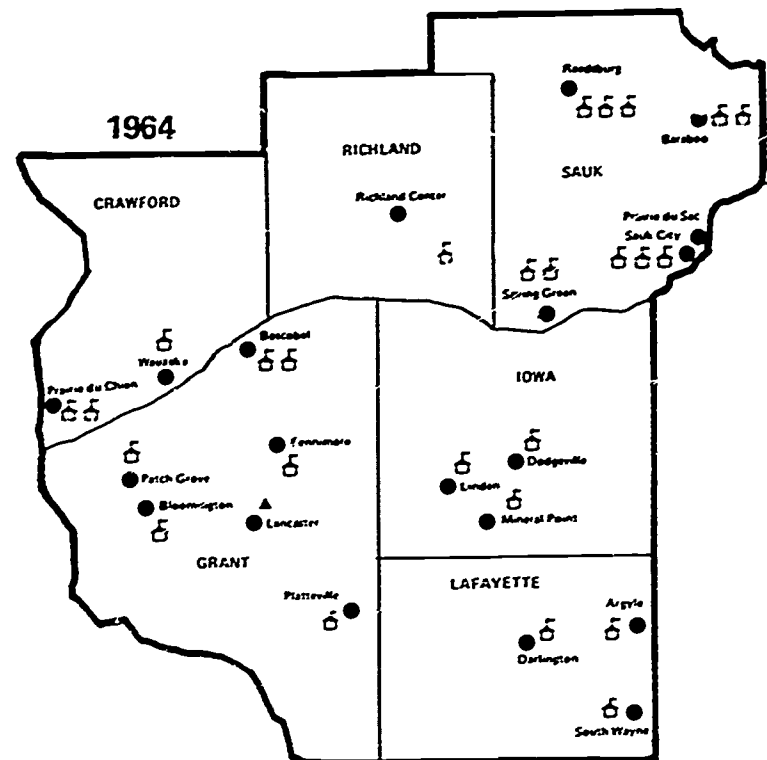
FOR TRAINABLE MENTALLY RETARDED						
APPROX. AGE	YOUNG PUPILS		INTERMEDIATE PUPILS		OLDER PUPILS	
	AGE 3	AGE 10	AGE 11	AGE 14	AGE 15	AGE 21
INSTRUCTIONAL DAY	SELF HELP - SELF CARE				PROPER DRESS	
	PRE-SCHOOL TRAINING		HEALTH			
	DRESSING		SAFETY PERCEPTION DEVELOPMENT		GROOMING	
	TOILETING				SOCIAL ROLES	
	COMMUNICATION - PHYSICAL DEVELOPMENT / GROUP PARTICIPATION				WRITTEN LANGUAGE	
	HOME - RECREATIONAL - VOCATIONAL				OCCUPATIONAL TRAINING	
	GROUP ACTIVITIES		ORAL LANGUAGE			
	PLAY		READINESS			
	HOME LIVING SKILLS				POST-SCHOOL WORK TRAINING	
	EXERCISES					
	FOLLOWING INSTRUCTIONS				SIMPLE MEAL PREPARATION	
					LEISURE TIME	
					COMMUNITY TRAVEL & SAFETY	

Source: "Study of Curriculum Planning," L. Wayne Campbell, Curriculum Consultant, California State Department of Education. Approved by California Board of Education, 1968.



## GROWTH OF SERVICES FOR THE RETARDED IN SOUTHWESTERN WISCONSIN

- Special Education Classes
- ▲ Associations for Retarded Children
- W Work-Study Program
- Youth ARC
- ★ Day Care Center
- ⊕ Fixed Point of Referral
- ⊖ Children Seen by Home Training Specialist
- Children Examined by Traveling Diagnostic Team
- ◆ Sheltered Workshop
- ▲ Southwest Badger Camp
- ⊖ Wisconsin Badger Camp
- † Children Given Psychological Testing for Admission to Special Education Classes (one figure represents 10 children)
- Temporary Care Home
- ⊖ Adult Activity Program
- ⊖ Community Placement Work



Source: Adapted from State of Wisconsin Study on Semi-Rural Community Growth in Services for the Mentally Retarded, 1968, 1969.



## **More Public-Private Partnerships In Mental Retardation Program Planning, Services And Research Should Be Developed.**

One such partnership, a PCMR-proposed national mental retardation information and resource system, is now moving toward initial build-up. When this system is in operation, probably as a federal government-data systems corporation partnership operating under the direction of an independent board representing both public and private agency interests in the mental retardation field, it will bring together and store research and program information for quick retrieval nationwide.

Other such partnerships include the Project FINE mentioned earlier, which is partially funded by a Department of Health, Education, and Welfare grant, and the National Association for Retarded Children-Department of Labor On-the-Job Training Project.

Growth of public-private partnerships—many of them informal cooperative arrangements—has been particularly noticeable at the grassroots community level, where the crunch of small budgets and large need for services is most urgently felt.

But these fragmentary efforts are only a beginning to the partnership effort needed to help join public agency, voluntary organization and business-labor resources in a concerted application to meeting mental retardation needs. Many of the measures recommended earlier

in this report and in previous reports could and should be developed through such joint action.

Among them:

- Comprehensive health and child development centers in poverty neighborhoods.
- Vocational and job education, training and employment programs for the retarded and other handicapped as well as job analysis and redesign to better fit retarded workers' skills and capabilities to work norms and needs, in both service and manufacturing industries.
- Establishment and operation of developmental training facilities for the retarded living in rural areas.
- Government-foundation partnerships formed to develop and carry out innovative, demonstration and special-need programs in the mental retardation field. Such partnerships might also absorb some of the cut when federal funding of local-based mental retardation programs is reduced before the community and its agencies are able to assume full program support.
- Development and cooperation of high quality residential care facilities that will permit parents or guardians of retarded individuals a free choice among varying program options. Such a choice is available today only to the affluent. In addition, states should enter public-private partnerships for the development and operation of community group homes for the retarded.
- Continuing operation of a national mental retardation public information and education campaign. An initial partnership in this area

was conducted through the Advertising Council by the President's Committee on Mental Retardation, the Department of Health, Education, and Welfare, The Joseph P. Kennedy, Jr., Foundation, and the National Association for Retarded Children.

Press, radio and television media made space and time contributions worth some \$40 million during the 3 1/2-year period of this campaign to build awareness and understanding of the retarded.

But the work is just begun. The public is now beginning to be aware of the retarded and their needs, and many have committed themselves to help in service and prevention activities. Such commitment, however, has been made by too few as yet. A genuine broad acceptance of retardation as a major problem of our society and of the retarded as fellow human beings having individuality, dignity and a personal stake in daily life and work is, regrettably, still far off.





Work with the mentally retarded.  
The pay is great.

**Work with the  
mentally retarded  
and this is the  
thanks you get.**



**You're 65.  
How about settling down  
and raising some  
children?**



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Washington, D.C. 20201 for Office of Education

**6 million mentally retarded  
have enough problems  
without you adding to them.**

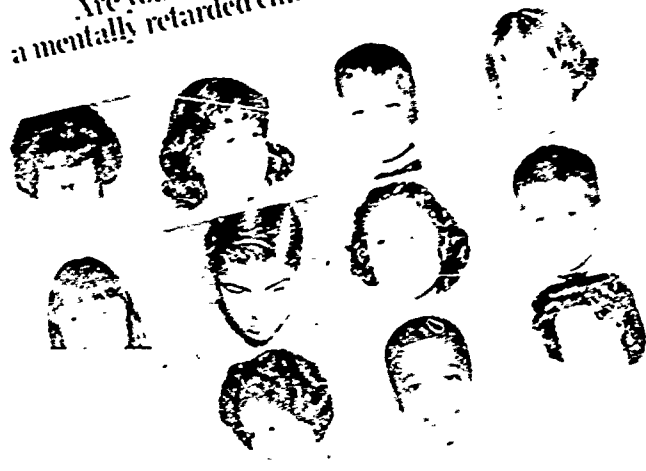
**Now, you're probably saying  
to yourself, "Why blame me?  
I didn't do anything."**

**That's the problem.**

**Do something.**

1. Encourage your school to have some programs and services to help the mentally retarded children.
2. Help your community to get all work done by the mentally retarded people.
3. Encourage employers to hire the mentally retarded people.
4. Help the mentally retarded people to get a job.
5. Help the mentally retarded people to get a home.
6. Help the mentally retarded people to get a family.

**Are you smart enough to know  
a mentally retarded child when you see one?**







## **Basic Research In Mental Retardation And Rapid Translation Of Research Results Into Service Program Uses Need Continued Encouragement.**

Man's curiosity has led him to explore the remotest crannies of his planet, go to the sea bottom at its deepest, conquer the highest mountain peaks, fly out from his earth and contemplate voyages to the stars.

But there is no greater wonder to be met in these voyages than the creature who makes them: Man himself.

And of him we know very little. Almost any of us knows more about astrophysics than about how the human creature grows and learns.

Mental retardation is a result of imperfect development in the human growing and learning processes. Research into its causes, effects, prevention and treatment can reveal much to us about normal development as well. Thus, mental retardation research has implications far beyond the condition itself.

Human development research in recent years has made findings of incredible portent. We can now see the tiny "tape" of matter, called DNA, by which human life in all its individual variants is passed from generation to generation. We can already make out some of the codings on that "tape" and see how variations on the tape are forerunners of differences—some of them "normal" variations such as eye color, some of them developmental anomalies—in individual human beings.

As we become more expert at reading the codings, we discover that we know enough in some cases to predict possibilities and degrees of developmental problem risk. Thus, for example, from our present knowledge of some human chromosome-child development abnormality relationships, we can discover some

of the couples who may produce a retarded child.

At the same time, major strides have been made in educational, behavioral and social science research. Fully as important as the biomedical research reported above, studies in behavior and the social sciences have found that human behavior can be modified in constructive ways, that the time of most rapid human growth and development is in earliest childhood, and that the "programming" from which the individual operates throughout his life in making his choices and decisions is largely set before his formal school learning process begins.

**The basic research that has produced these historic findings continues critically needed, as does the research and experimentation that makes the outcomes of such findings conveniently, economically available to every American needing them. We urge that human development research be included in the first rank of the nation's action priorities and that broad-based public and private support from the health, education, social service, behavior and related fields be given to such research.**

In this connection, we applaud President Nixon's action, in early May, directing the Secretary of Health, Education, and Welfare to initiate detailed research into the relationship between malnutrition and mental retardation.

Equally important for the mentally retarded as well as all other Americans is the need for more and better information about how we learn. Research in this vital area is being carried on in often unrelated small fragments throughout the nation's 20,000 school districts and 5,000 institutions of higher education. Much of this research is so narrow-targeted, so esoteric in interest and so locked into a single professional discipline as to have little general use or value.

**To stimulate and coordinate research into the basic human learning processes, therefore, we urge action now on the establishment of a**

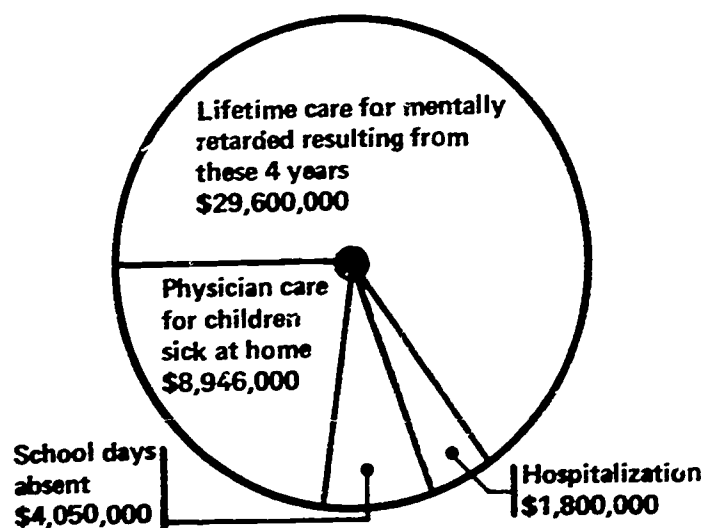


national learning institute or foundation. This foundation would particularly promote investigations of human learning processes and potential that join a number of disciplines. The foundation should be a public-private partnership organized and funded in much the same way as the National Science Foundation.

An aspect of research of critical importance in today's fast-changing and explosively growing communities is the study of service delivery needs and development of workable grassroots systems in response to those needs. Research breakthroughs in human development and learning will be useless unless the findings can be translated into services that reach and aid people in their homes, schools and work.

We recommend, therefore, that public agencies and private organizations having programs related to human development and learning problems such as mental retardation earmark a steady portion of their budgets to the cooperative evaluation and application of new information affecting their programs.

#### ONE MILLION MEASLES CASES IN NEXT 4 YEARS\* COULD COST U.S. ECONOMY \$45,000,000



\*Based on 1968 measles incidence of 225,000 cases nationwide, projected. Preliminary compilations of 1969 data find the rate holding steady or increasing slightly.

Source: Adapted from data surveyed by Pitman and Moore Division of the Dow Chemical Company. Projections are based on a Rhode Island study in 1967.

### The Special Needs Of The Mentally Retarded Should Be Taken Into Account In Social And Residential Care Planning For The Coming Decades

Until major mental retardation preventive measures have been established and are producing results, we must expect and accept the fact of a large number of mentally retarded individuals in the U.S. population. The best estimates place that number presently at around 6 million individuals. The total, of course, will grow with the population.

We must plan for the lives and careers of these retarded in tomorrow's communities, schools, working places, leisure-time programs and residential facilities.

And we must make as great as possible integration of the retarded into normal community living and working patterns the objective of that planning.

In the community of the future there should be no such thing as a separate population of mentally retarded people for whom there are special group programs.

The total integration of the retarded into normal community living, working and service patterns is a long-range objective. But now is the time to begin working toward it by creating the channels through which both the regular and special services needed by the retarded can be given in a unified group of public and private programs working to help all handicapped people realize their full potential.

One part of meeting the challenge of bringing the retarded humanely and effectively into the community of human concern and endeavor must be the final eradication of the system that crowds large numbers of retarded people together in warehouse-like living conditions. No

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matter how many individuals may be involved—whether 5, 50 or 5,000—residential and other programs for the retarded that are group custodial in nature destroy the potential for growth and development among those confined in them. Such programs are a standing reproach to our national professions of concern for the individual.

**Every state that has large, mass custody programs for the retarded should move vigorously to develop quality programs that are aimed at habilitation of retarded individuals for fullest possible participation in community living and work.**

**Lastly, but far from least significantly, every state should review and reform its laws that affect the status and rights of the mentally retarded.**

Almost all such laws were written half a century or more ago and reflect views of the retarded that are obsolete. Most, in their assumption of incapacity on the part of the retarded are, at the least, patronizing. At their worst, they deny the retarded individuals any opportunity to express his views and take part in the decisions affecting his life and career.

**We also recommend that the nation's voluntary associations working for the retarded redouble their efforts to involve state legal and judicial groups in the study and revision of guardianship, commitment, minority and other laws as they affect the retarded.**

Nationally, these same groups should also cooperate in the development of a "Bill of Rights" of the retarded. (See Page 30.)

The retarded are due the same inalienable rights to life, protection of the laws, dignity of person and opportunity as all other Americans. They, too, have responsibilities to themselves and their fellow citizens to be as significant, producing members of the community as they

can. These basic rights and responsibilities should be expressed in state laws affecting the retarded. Only a few states, however, have taken steps in this direction.

# MR 69:

## **MR. PRESIDENT:**

The nation has made significant accomplishments in mental retardation programs, prevention and research during the past two decades.

Credit for this achievement belongs to countless people in all walks of life. It belongs equally to professional specialists and the parents of retarded children, to agency planners and administrators as well as to community volunteers, to students and researchers, to teachers, to you and your three immediate predecessors in the Presidency of the United States.

The effort has prospered, and will continue to prosper, in direct ratio to the interest, involvement and commitment of the American people.

The fact of some success, however, should not blind us to the vast job yet to be done. While some of the retarded now receive the help they need to live contributing, fulfilling lives and many receive some help, most still live much as before. They are untouched by the hope which new programs, methods, knowledge and understanding can bring to them.

In short, we have only begun to do what needs to be done to overcome the baleful undertow of mental retardation in American life. Now we must move toward decisive advance of that work during the coming decade. This will require a mobilization of concern, expertise and practical action at all levels in American society, public and private. Your interest and support in this endeavor will give new impetus toward ultimate success.

Within the next few months, Mr. President, we will have for your and the nation's consideration specific reports, with recommendations for local, state and national action, on the following aspects of mental retardation needs and activities:

Habilitation and employment of the retarded (a joint report with your Committee on Employment of the Handicapped)

The relationships between poverty and mental retardation.

Education programs for the retarded, including suggested curricula.

Research completed and under way into the relationship between malnutrition and mental retardation.

Lead poisoning as a cause of mental retardation.

**W**e shall be holding work conferences bringing together program experts, community planners, parents, educators and scientific authorities to explore and make recommendations on:

Problems of education in the inner city, with special reference to the needs for special education programs for handicapped learners.

The introduction and implementation of change in residential services for the mentally retarded.

Recruitment, training and deployment of manpower resources to meet mental retardation service needs.

**A**lso in preparation are reports, with recommendations, on:

The economic costs and impact of mental retardation in the national economy.

Nationwide needs, problems and change patterns in special education for the retarded as well as other handicapped.

Special needs and problems of the adult mentally retarded.

Special needs and problems of the retarded who live in rural areas.

**W**e ask your aid, Mr. President, in endorsing the release of this report to the public and in urging action at all levels for a continuing, effective national attack on the problem of mental retardation.



# Declaration of General and Special Rights of the mentally retarded

*WHEREAS the universal declaration of human rights, adopted by the United Nations, proclaims that all of the human family, without distinction of any kind, have equal and inalienable rights of human dignity and freedom;*

*WHEREAS the declaration of the rights of the child, adopted by the United Nations, proclaims the rights of the physically, mentally or socially handicapped child to special treatment, education and care required by his particular condition.*

The International League of Societies for the Mentally Handicapped expresses the general and special rights of the mentally retarded as follows:

ARTICLE I. The mentally retarded person has the same basic rights as other citizens of the same country and same age.

ARTICLE II. The mentally retarded person has a right to proper medical care and physical restoration and to such education, training, habilitation and guidance as will enable him to develop his ability and potential to the fullest possible extent, no matter how severe his degree of disability. No mentally handicapped person should be deprived of such services by reason of the costs involved.

ARTICLE III. The mentally retarded person has a right to economic security and to a decent standard of living. He has a right to productive work or to other meaningful occupation.

ARTICLE IV. The mentally retarded person has a right to live with his own family or with foster parents; to participate in all aspects of community life, and to be provided with appropriate leisure time activities. If

care in an institution becomes necessary it should be in surroundings and under circumstances as close to normal living as possible.

ARTICLE V. The mentally retarded person has a right to a qualified guardian when this is required to protect his personal well-being and interest. No person rendering direct services to the mentally retarded should also serve as his guardian.

ARTICLE VI. The mentally retarded person has a right to protection from exploitation, abuse and degrading treatment. If accused, he has a right to a fair trial with full recognition being given to his degree of responsibility.

ARTICLE VII. Some mentally retarded persons may be unable, due to the severity of their handicap, to exercise for themselves all of their rights in a meaningful way. For others, modification of some or all of these rights is appropriate. The procedure used for modification or denial of rights must contain proper legal safeguards against every form of abuse, must be based on an evaluation of the social capability of the mentally retarded person by qualified experts and must be subject to periodic reviews and to the right of appeal to higher authorities.

October 24, 1968.

THE INTERNATIONAL LEAGUE OF SOCIETIES FOR THE MENTALLY HANDICAPPED

## **A Brief Summary Of Recommendations Made By The Committee In Late 1968**

### **On mental retardation in poverty areas**

- Every U.S. child has the right to health and education services from birth.
- Supportive manpower for low income area health, educational and social services should be aggressively promoted and developed.
- Rural-serving agencies should pool resources to develop regional health, special education and social service programs.
- A community living service, modeled on the U.S. Agricultural Extension Service, should be formed.
- The nation's youth organizations should expand service and involvement activities for and with low income area young people.
- Community development agencies should include the needs of the retarded as a factor in their planning.
- Voluntary family planning and birth control services should be available through community agencies.
- Facilities should be located for best service to all of a community's mentally retarded people.

### **On manpower for mental retardation programs**

- Increased efforts should be made to bring both professional specialists and supportive workers into mental retardation programs.
- Specialists' functions should be evaluated with a view to transfer of as many

functions as possible to trained supportive workers.

- Federal grants should be made to states to assist in volunteer service program development.
- Mental retardation programs should develop employee education and training programs.
- The federal government should develop a mental retardation program staff exchange activity.

### **On residential services for the retarded**

- Improved standards and a system of accreditation for residential programs for the retarded should be developed.
- The federal government's Hospital Improvement and Hospital In-Service Training Programs should be expanded.
- A program for relocating and rebuilding obsolete residential facilities should be established.
- A system to give parents and guardians a free choice in selecting residential services should be established.
- A system of loans or grants should be established to help private organizations develop alternative forms of residential service for the retarded.
- Welfare agencies should earmark a portion of their resources for services to the retarded and their families.
- Mental health agencies should take leadership in developing services for the retarded who are emotionally disturbed.

## Principal Publications of The President's Committee on Mental Retardation

MR 67: The Committee's first report. Outlines 10 areas in which citizen and agency action can produce progress in combating mental retardation.

MR 68: THE EDGE OF CHANGE. The Committee's second report. Covers grass-roots developments in mental retardation programs. Surveys needs and makes recommendations on residential services, manpower development and poverty-mental retardation links.

MR 69: TOWARD PROGRESS—THE STORY OF A DECADE. Surveys major mental retardation research and service developments of the 1960's, makes recommendations for programs and approaches to be developed during the 1970's.

HELLO WORLD! Popularly written general information booklet. Illustrates various kinds of mental retardation with case stories. Includes action tips for parents, community organizations, students, seekers of career and volunteer service opportunities.

TO YOUR FUTURE . . . WITH LOVE. For youth and college students seeking meaningful volunteer and career opportunities.

THE MENTALLY RETARDED IN MODEL CITIES. Report of a workshop, with suggestions for planners.

CHANGING PATTERNS IN RESIDENTIAL SERVICES FOR THE MENTALLY RETARDED. A monograph on history, development, problems and possible future patterns of residential services for the retarded.

PCMR MESSAGE. The Committee's newsletter. 6 to 8 issues a year. Among features in recent issues have been articles on: mental retardation-related papers from the XII International Congress of Pediatrics; the future of residential service facilities; scientific research and mental retardation; a reporter's look at mental retardation's public image; the community volunteer's stake in mental retardation action; the retarded victims of deprivation.

INFORMATION OFFICE NEWS CLIPPING SERVICE. Topical clippings from the mental retardation field nationwide. 48 to 50 issues a year.





**PRESIDENT'S COMMITTEE ON MENTAL RETARDATION**

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